

County: Milwaukee  
 SHOREWOOD HEIGHTS HEALTH AND REHABILITATION  
 3710 NORTH OAKLAND AVENUE

Facility ID: 4200

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SHOREWOOD 53211 Phone:(770) 870-2859  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/02): 172  
 Total Licensed Bed Capacity (12/31/02): 243  
 Number of Residents on 12/31/02: 56

Ownership: Non-Profit Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 137

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No						1 - 4 Years			19.6
Supp. Home Care-Personal Care	No						More Than 4 Years			25.0
Supp. Home Care-Household Services	No		Developmental Disabilities	1.8	Under 65	51.8				55.4
Day Services	No		Mental Illness (Org./Psy)	23.2	65 - 74	21.4				-----
Respite Care	Yes		Mental Illness (Other)	42.9	75 - 84	19.6				100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	1.8	85 - 94	5.4	*****			
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	7.1	95 & Over	1.8	Full-Time Equivalent			
Congregate Meals	No		Cancer	0.0		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No		Fractures	0.0		100.0	(12/31/02)			
Other Meals	No		Cardiovascular	0.0	65 & Over	48.2	-----			
Transportation	No		Cerebrovascular	14.3		-----	RNs			9.8
Referral Service	No		Diabetes	5.4	Sex	%	LPNs			24.7
Other Services	No		Respiratory	1.8	-----	-----	Nursing Assistants,			
Provide Day Programming for			Other Medical Conditions	1.8	Male	66.1	Aides, & Orderlies			
Mentally Ill	No			-----	Female	33.9				
Provide Day Programming for				100.0		-----				
Developmentally Disabled	No					100.0				

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#### Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			7	12.7	131	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	12.5
Skilled Care	0	0.0	0			25	45.5	112	0	0.0	0	1	100.0	149	0	0.0	0	0	0.0	0	26	46.4
Intermediate	---	---	---			21	38.2	94	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	21	37.5
Limited Care	---	---	---			1	1.8	81	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.8
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			1	1.8	166	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.8
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0				55	100.0		0	0.0		1	100.0		0	0.0		0	0.0		56	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							
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Percent Admissions from:		Activities of		%	% Needing Assistance of		% Totally	Total	
		Daily Living (ADL)		Independent	One Or Two Staff		Dependent	Number of Residents	
Private Home/No Home Health		11.0	Bathing		19.6	33.9	46.4	56	
Private Home/With Home Health		0.0	Dressing		19.6	33.9	46.4	56	
Other Nursing Homes		7.3	Transferring		19.6	33.9	46.4	56	
Acute Care Hospitals		59.8	Toilet Use		19.6	33.9	46.4	56	
Psych. Hosp.-MR/DD Facilities		20.7	Eating		19.6	33.9	46.4	56	
Rehabilitation Hospitals		0.0							
Other Locations		1.2	*****						
Total Number of Admissions		82	Continence		%	Special Treatments		%	
Percent Discharges To:			Indwelling Or External Catheter		3.6	Receiving Respiratory Care		1.8	
Private Home/No Home Health		13.7	Occ/Freq. Incontinent of Bladder		58.9	Receiving Tracheostomy Care		1.8	
Private Home/With Home Health		0.0	Occ/Freq. Incontinent of Bowel		50.0	Receiving Suctioning		3.6	
Other Nursing Homes		53.6				Receiving Ostomy Care		0.0	
Acute Care Hospitals		14.3	Mobility			Receiving Tube Feeding		10.7	
Psych. Hosp.-MR/DD Facilities		1.8	Physically Restrained		0.0	Receiving Mechanically Altered Diets		51.8	
Rehabilitation Hospitals		0.0							
Other Locations		1.2	Skin Care			Other Resident Characteristics			
Deaths		15.5	With Pressure Sores		1.8	Have Advance Directives		0.0	
Total Number of Discharges			With Rashes		0.0	Medications			
(Including Deaths)		168				Receiving Psychoactive Drugs		69.6	

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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		This Facility	Ownership:	Bed Size:		Licensure:		All	
		%	Nonprofit	200+		Skilled		Facilities	
			Peer Group	Peer Group		Peer Group		Peer Group	
			% Ratio	% Ratio		% Ratio		% Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds		56.4	85.6	0.66	80.4	0.70	84.2	0.67	85.1
Current Residents from In-County		96.4	88.1	1.09	83.5	1.16	85.3	1.13	76.6
Admissions from In-County, Still Residing		13.4	23.6	0.57	25.1	0.53	21.0	0.64	20.3
Admissions/Average Daily Census		59.9	134.2	0.45	101.8	0.59	153.9	0.39	133.4
Discharges/Average Daily Census		122.6	140.2	0.87	107.7	1.14	156.0	0.79	135.3
Discharges To Private Residence/Average Daily Census		16.8	46.8	0.36	34.2	0.49	56.3	0.30	56.6
Residents Receiving Skilled Care		58.9	90.1	0.65	89.6	0.66	91.6	0.64	86.3
Residents Aged 65 and Older		48.2	96.3	0.50	90.9	0.53	91.5	0.53	87.7
Title 19 (Medicaid) Funded Residents		98.2	52.8	1.86	68.5	1.43	60.8	1.62	67.5
Private Pay Funded Residents		1.8	34.8	0.05	18.7	0.10	23.4	0.08	21.0
Developmentally Disabled Residents		1.8	0.6	2.87	0.7	2.62	0.8	2.22	7.1
Mentally Ill Residents		66.1	35.2	1.88	38.5	1.71	32.8	2.02	33.3
General Medical Service Residents		1.8	23.7	0.08	16.9	0.11	23.3	0.08	20.5
Impaired ADL (Mean)		64.3	50.5	1.27	52.1	1.23	51.0	1.26	49.3
Psychological Problems		69.6	54.7	1.27	54.1	1.29	53.9	1.29	54.0
Nursing Care Required (Mean)		8.9	7.2	1.24	7.7	1.15	7.2	1.24	7.2